UNSIGNED PTO/SB/02 (8-96)
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Under the Paperwork Re	eduction : 1995, no persons are required to r	espond to a collection of intormation	it contains a valid OMB control number.
	PATENT APPLICATION	(Foreign Agent involved)	Docket Number (Optional)
	reby declare that:		1-14746
My residence, post office address I believe I am the original, first ar	s and citizenship are as stated below no nd sole inventor (if only one name is li bject matter which is claimed and for v tivated Fluorescence A	which a natent is sought on the inv	d joint inventor (if plural ention entitled "Device For pecification of which
is attached hereto unless the follo	wing box is checked:		
xx was filed on 12 May 19	as United States Application and was amended on 16	on Number or PCT International April and 17 May (if	applicable).
I hereby state that I have reviewe	d and understand the contents of the al	pove identified specification, inclu	ding the claims, as
amended by any amendment refe I acknowledge the duty to disclo- I hereby claim foreign priority be	erred to above. se information which is material to pat enefits under 35 U.S.C. § 119(a)-(d) or	entability as defined in 37 CFR \$ § 365(b) of any foreign application gnated at least one country other the	1.56. on(s) for patent or inventor's han the United States,
certificate, or § 365(a) of any PC	fied below, by checking the box, any f	oreign application for patent or in	ventor's certificate, or PCT
listed below and have also identi	a filing date before that of the applicati	on on which priority is claimed.	Priority Not Claimed
Prior Foreign Application(s)	a nimb date correct the correct to t		. =
197 19 422.2 _	Germany	12 May 1997 (12.	05 . 97) ·
(Number)	(Country)	(Day/Month/Year File	cd)
(Number)	(Country)	(Day/Month/Year File	ed)
	r 35 U.S.C. § 119(e) of any United Sta	tes provisional application(s) listed	i below.
(Application Number)	(Filing Date)	
(Application Number)		Filing Date)	
and the second of the second o	25 H S C S 120 of any United States a	application(s), or § 365 (c) of any	PCT International
and the state of t	ad States, listed below and insofar as t	he subject matter of each of the cit	atilis of this application is
the second of the second	States or PCT International application	n in the manner provided by the in	ist paragraph of 55 C.E.C.
and the second second and the district	disclose information which is materia	d to patentability as defined in 37	CTR & 1.30 which became
available between the filing date	of the prior application and the nation	al or PCT International filing date	of this application.
		ng Date)	(Status patented, pending, abandoned)
(Application Number)			(Status patented, pending, abandoned)
(Application Number)	(Fil	ing Date)	
The undersigned hereby authori	izes the U.S. attorney or agent named I	nerein to accept and follow instruc	tions from
	as to any action to be tal	cen in the Patent and Trademark C	Mice regarding and
whom instructions	nunication between the U.S. attorney of smay be taken, the U.S. attorney or ag	Citt Hairied Hereitt Will of all Hereit	- ,
I hereby appoint the following a	ittomey(s) and/or agent(s) to prosecute		itioner Information Sheet
Patent and Trademark Office co	Phillip S. Oberlin	at telephone number	(419) 249-7149
Address all telephone calls to	Marshall & Melhorn	, Four SeaGate - 8t	h Floor, Toledo, Ohio
Address all correspondence to	43604 U.S.A.		
I hereby declare that all statemen	nts made herein of my own knowledge	are true and that all statements ma	ade on information and
and the second of the second of	J further that these statements were ma	ide with the knowledge mai willia	it laise statements and me
Tites as made are nunishable by t	ine or imprisonment, or both, under So	ection 1001 of little 18 of the Only	ed States Code and that
such willful false statements ma	y jeopardize the validity of the applica	tion of any patent issued increon.	
Full name of sole or first inventor	or (given name, family name)	MATTHIAS LAU	
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Full name of second joint inven			
Lan name of second louis mach	tor if any (given name, family name)		
	tor, if any (given name, family name)	Date	
Second Inventor's signature	tor, if any (given name, family name)	Date	
	tor, if any (given name, family name)		

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DECLARATION

REGISTERED PRACTITIONER INFORMATION (Supplemental Sheet)

Name	Registration Number	Name	Registration Number
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